

My child has a brain disorder, too

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My name is Paula Eifler and I would like to share my personal experiences trying to access mental health care for my son Alexander. My family has Blue Cross Blue Shield PPO insurance. Our policy has a \$100 individual deductible per year, a \$200 family deductible and a \$1000 family co-pay per year before they cover 50% of mental health services they deem 'reasonable and customary'. I think a lot of people think private insurance, especially Blue Cross Blue Shield, means you have excellent coverage. I am here to tell you that just isn't so when it comes to mental health care.

In 2002, my son was hospitalized for his severe mental health disorders. During his stay, he was placed on medications. The hospitalization, medications, and doctor expenses forced us to have to take out a second mortgage on our home. To ensure our son was able to get the mental health care he so desperately needed, we now pay over \$1600.00 month for our mortgage payment. When you are already struggling each and every month just to make ends meet, paying a second mortgage is the last thing you want to do. But we had no choice...

In 2009, my son had to be hospitalized again. He was 14 at the time and struggling in school, being bullied by his peers, and acting out at home. After 5 days in the hospital, my son was released. His doctor recommended residential placement, however, he was denied access due to lack of coverage. Between Dec. 14 and Dec. 29, my son was admitted to a psychiatric hospital twice. But due to the insurance's refusal to pay, we were forced to bring him home even though we knew he needed more intense services than the outpatient visits could provide. As a result of the hospitalizations we were left with a bill of \$6240.00 plus another \$2045 for the psychiatrist services during his stay.

Upon release, we were offered home-based services through a local community mental health provider. Our ability to pay was ultimately assessed at \$1000 per month. When I contacted Blue Cross Blue Shield, we were told our policy does not cover home-based therapy provided by a social worker. For our son to receive the intense, home-based therapy he needed after his three psychiatric hospitalizations, we ended up spending over \$12,000.00!

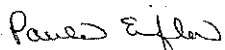
Due to the mounting costs, we were forced to discontinue home-based therapy and return to outpatient office visits. Since this form of treatment was not effective and provided little to no benefit to my son, he ultimately refused to keep attending and we finally discontinued therapy sessions all together.

My husband works overtime every chance he gets to try to keep up with our mounting bills. With the mortgage crisis and home values plummeting, we now have an 'underwater mortgage' with no option to refinance or get out of this debt. We can not put anything in savings or save for retirement since every penny we have goes to just keep our head above water so our son can have the mental health care he needs.

We all know how important it is for children with mental health disorders to be identified and treated early. This alone saves thousands of dollars by keeping kids out of residential treatment centers and avoiding hospitalizations. Children with mental health disorders need to have equal access to care the same way a child would if they had Heart Disease, Diabetes, or Cancer.

Mental illness is something my son was born with. He did not choose his condition but he must live with it each and every day. So why is it okay for insurance companies to discriminate against his condition? It is time for a change. Michigan families deserve better. **Michigan families deserve Parity for All – Not just Some!**

Sincerely,



Paula Eifler

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